DOCUMENT # Name and Mailing Address

Signature of

Managing Member/Manager

Typed or printed name of signing Managing Member/Manager

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SECRETARY OF STATE TARBAHASSEE, FLORIDA

0005246 01 FP 0.352 **PRSRT T6 0 0615 33759-391106 tallanthanlahdalamilahdandinatilamilantal LDWM VENTURES, LLC 100 HAMPTON ROAD, #6 CLEARWATER-FL 33759-3911



2. New Mailing Acidress City, State, Zip			4. State/Country of Formation FL		
Principal Place of Business	ess 3. New Principal Place of Business Address		C FELLULATION OF THE PROPERTY		Applied For
100 HAMPTON ROAD, #6 CLEARWATER FL 33759					
	City, State, Zip	City, State, Zip		7. CERT/FICATE OF STATUS DESIRED 55.00 Additional Fee require for a Certificate of Status	
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent		
NODWAY OUT		Name Name			
NORMAN, CHRISTOPHER H 315 S. HYDE PARK AVENUE		Street Address (P.O. Box Number is N		Not Acceptable)	
TAMPA FL 33606	•				
				FL	Zip Code
10. I, being appointed the registered agent of	the above named limited liability compa	any am familiar with	and account the obligati	one of Charter COO E.D.	
degistered Agent	PEGISTERED AGENT MUST SIGN	w.t.		Date	72 /
1. Names and Street Addresses of Each Mana	aging Member/Manager	N 200 6 20 1000 Temperature (100 100 100 100 100 100 100 100 100 10	Market Ma	Market Company of the Market Company of the Company	
Title(s) Name of Managin Members/Manage	•	Street Address of Each Managing Member/Manager		City / State / Zip	
MGR SINEATH, JACKELYN	100 HAMPT	100 HAMPTON ROAD, #6		CLEARWATER FL 33759	
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